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## EPP0625

### Psychometric properties of the Parma Scale for the treatment evaluation of prisoners with mental disorder: a new instrument for routine outcome monitoring in different forensic psychiatric settings

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**Introduction:** The clinical relevance of Routine Outcome Monitoring (ROM) to formulate longitudinal evaluations of treatment appropriateness/efficacy and to assist decision making aimed at improving the quality of person-centered interventions has been poorly implemented in forensic psychiatry, also in Italy. Indeed, very few assessment instruments have been developed in this crucial field.

**Objectives:** As reliable ROM instruments are lacking, the aim of the current investigation was to examine psychometric properties (i.e. reliability, concurrent validity and sensitivity to measure scores' longitudinal changes) of the Parma Scale (Pr-Scale) (a new instrument for the evaluation of offenders with mental disorder) in an Italian sample of forensic psychiatric patients.

**Methods:** Participants were male adult offenders with mental disorder recruited within the Parma REMS ("Residence for the Execution of Security Measure") or the Parma Penitentiary Institute (PPI). Exclusion criteria were known moderate/severe intellectual disability or any other medical condition inducing inability to express a valid consent for participating in the research. The Pr-Scale includes 20 items divided into 3 main domains: "Historical", "Clinical" (observational) and "Treatment Planning". To test psychometric properties of the Pr-Scale, we examined interrater reliability, short-term (1-week) test-retest reliability and internal consistency. As measure of concurrent validity, a correlation analysis of Pr-Scale item scores with corresponding HKT-R (the "Historisch, Klinische en Toekomstige - Revisie" instrument) item subscores was performed. Finally, we examined the Pr-Scale sensitivity to measure scores' longitudinal changes over a 3-month treatment follow-up period.

**Results:** 60 male adult patients were recruited in this study. Our findings showed good to excellent interrater and test-retest reliability, concurrent validity and internal consistency for the Pr-Scale. Pr-Scale scores also display a moderate to large changeability over time (Intra-Class Correlation coefficient = 0.963, coefficient of stability = 0.997, Cronbach's  $\alpha$  = 0.736). Statistically significant correlations of Pr-Scale item scores with the corresponding HKT-R scores were found. Across the 3-month follow-up period, we observed statistically significant sensitivity values in measuring

longitudinal changes for the Pr-Scale total score and Pr-Scale domain and item subscores.

**Conclusions:** Our results support the clinical use of the Pr-Scale in different forensic psychiatric settings (i.e. prison, REMS) as reliable ROM instrument.

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## EPP0626

### Psychiatric hospitalization among offenders: a retrospective study in the acute psychiatric ward in Monza, Italy

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**Introduction:** The closure of forensic psychiatric hospitals and the conversion to a residential model of care based on secure residential units in the community (REMS) has made Italy the first and only country in the world to have followed the principles of the deinstitutionalization movement. Following the reform, several management issues have emerged, such as the creation of long waiting lists for admission to REMS. Improper hospitalization in Acute Psychiatric Units (SPDC) has often been used to address this issue. In addition, the handover of inmates' care to Mental Health Departments (DSMD's) has posed further challenges. To date, the field has received little attention from international literature.

**Objectives:** Description and analysis of a sample of offender inpatients hospitalized in an acute psychiatric unit.

**Methods:** We conducted a retrospective study including male offenders admitted to the SPDC of San Gerardo Hospital (ASST Monza), between January 2007 and September 2022. Data analysis was performed by using SPSS.

**Results:** 120 male offenders were included for a total of 204 admissions. 98 offenders (81.7%) were hospitalized once. We observed an absolute (N=1; N=30) and percentage (0.2%;12%) increase in the number of hospitalized offenders per year during the time period under study. Jail was the main provenance in the sample (46.6%), followed by residential care facilities (27%) and the psychiatric observation unit (ROP) of Monza's jail (10.8%). The two most prevalent diagnoses were personality disorders (37.5%) and psychosis (39.2%). In addition, 66 subjects (55%) had a history of substance abuse. The average duration of hospitalization was 19.45 days; it increased to 77 days for inpatients waiting to be transferred to REMS. Hetero-aggressive behavior as the reason for admission was associated with longer hospitalization ( $p=0.031$ ), while attempted suicide correlated to shorter hospital stay ( $p=0.032$ ). Out of the 55 offenders who attempted suicide, 41 came from jail (74.5%). Finally, longer hospitalizations were associated with an increased number of adverse events ( $p=0.001$ ).

**Conclusions:** Psychiatric hospitalizations of offenders have increased over the last years. This population tends to require longer hospital stays (regional average of SPDC hospitalization in Lombardy: 14 days), which are even lengthier for inpatients

destined to REMS. Longer hospitalizations exert a large burden on DSM-5 and impact the general health of patients, exposing them to a higher risk of adverse events. Further studies are needed to confirm our findings and to develop better strategies for the management and care of offender patients.

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## EPP0627

### Resilience for Juvenile Recidivists Versus One-Time Offenders in Argentina

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**Introduction:** Resilient potential of 100 young male offenders (aged 16-17), in Buenos Aires was assessed using a translated and revised version of the Resilience Scale (RS) of 14 items (Wagnild, 2009). Data on family criminality, school achievement and socioeconomic status was also obtained for both groups. The greater the resilient potential the greater the opportunity of not to reoffend irrespective of being controlled by key risk factors.

**Objectives:** 1-Do repeat offenders have lower resilient potential than one-time offenders? 2. If a relationship between resilience and repeat offending does exist, is this explained by family criminality, low school achievement or low socioeconomic status?

**Methods:** Psychosocial interviews with each participant were conducted by the named author, under strict judicial conditions considering privacy in all cases, based on informed consent, with the condition of maintaining the concealed identity of the participants. In all cases it was clarified that youth participation was voluntary.

**Results:** Table 1.

M (SD) M (SD) t d p

Age 16.20 (0.41) 16.45 (0.50) 2.70 0.66 0.008

Resilience M (SD) M (SD) t d p

Factor I 29.92 (7.25) 63.45 (4.92) 27.16 5.41 <0.001

Factor II 7.37 (1.95) 16.59 (1.87) 24.13 11.33 <0.001

Total Resilience 37.29 (8.67) 80.09 (6.49) 27.82 5.59 <0.001

Risk Factors % % chi d p

Family Criminality 44.9 3.9 20.81 1.03 <0.001

Low School Achievement 98.0 11.8 71.31 3.15 <0.001

Low Socioeconomic Status 42.9 11.8 10.73 0.69 0.001

Table 2. Independent Predictors of Repeat Offending Variables  $\beta$  p

Criminality in the family 2.994 <0.001

Low school achievement 5.886 <0.001

Low socioeconomic status (SES) -1.727 <0.001

Note. All comparisons  $p < .001$ .

**Conclusions:** Taking into account the lack of studies on resilience in juvenile offenders in both national and international research the findings of the present study provide an important contribution in the field of juvenile offending, particularly in the view of further interventions aimed at the prevention and rehabilitation in the near and long term of juvenile offenders in Argentina.

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## EPP0628

### Epidemiological, clinical, and forensic approach to a series of defendants examined in criminal psychiatric expertise

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**Introduction:** The transgression of the law can be a deliberate act by a lucid adult, but it can also be the result of a deficiency in judgment and discernment due to lack of age or insanity. Psychiatric expertises are more and more solicited in the penal field with the objective of identifying the causal link between mental illness and the criminal act.

**Objectives:** The objective of this work was to give an overview of the subjects expertised, the offences and the pathologies encountered through the report of a psychiatric expertise activity in criminal law.

**Methods:** It is a retrospective descriptive study carried out on the criminal psychiatric expertises made for a forensic act in the psychiatric department of Mahdia during the period from January 1, 2003 to March 30, 2022.

**Results:** In total, we collected 101 defendants. The average age of our study population was  $35 \pm 12.07$  years. The majority of our study sample was male (98%), from an urban area (50%). 46.6% had primary education and only 11.2% had higher education.

The defendants were single in 57.8% of the cases, and almost half (45.7%) had no occupation. Two-thirds of the accused (61.2%) had experienced emotional deprivation at a young age. The problematic use of psychoactive substances was found in 10.3%, as well as alcohol consumption in 46.6%. Moreover, 39.7% of the patients had a personal psychiatric history and 19% had been incarcerated at least once. The forensic acts were mostly against people (62.9%) dominated by physical aggression (33.6%) followed by homicide or its attempt in 19% of the cases.

The majority of patients were not related to their victims (62.1%). The nosographic diagnosis found was a personality disorder in 32.75% of cases, followed by schizophrenic disorders in 22.4% of cases.

**Conclusions:** Psychiatric expertise is a useful, complex and noble clinical act. Determining the predictive factors of a possible acting out allows to specify the objectives of interventions aiming at limiting the acts of violence, hospitalizations and incarcerations of patients suffering from mental disorders.

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## EPP0629

### Prevalence of Treatment Resistant Psychoses in a Complete National Forensic Mental Health Service: A Dundrum Forensic Redevelopment Evaluation Study (D-FOREST)

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